									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003								19779730					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			33			•	1	RATE	FEE	٦.	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3 7minus 20=		•			XS 9=	117	OR	X\$16=		
INDEPENDENT CLAIMS			_ m	inus 3 =				X43=	1.	OR	X86=		
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT			· 📮		-145=		OR	-290=		
- 11	the difference	in column 1 is	less than z	ess than zero, enter "0" in column 2			į	TOTAL	507	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	2/18/4	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	· <i>3</i> 3	Minus	- 2	9	- 13		XS 9=	1/7,00	OR	X\$18=		
	Independent	. /	Minus	-3		<u> </u>		X43=		OR	X86=	•	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=		OR	+290=		
		•					L	TOTAL			TOTAL		
		10.1				10-1 61	A	DDIT. FEE	L	OR	ADDIT. FEE		
		(Column 1) I CLAIMS		(Colum		(Column 3)	1 -		1 400:			450	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	•	= .		X\$ 9=		OR	X\$18=		
	Independent		Minus	•••	<u> </u>	-	lΓ	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		'	+145=	·	OR	+290=		
							Al	TOTAL		OR ,	.TOTAL ADDIT. FEE	·	
			•	• .									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	2	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	• •	Minus	***	•	.	-	X43=		ı	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							,,,,,,		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												· .	
!	the 'Highest Nun	nn 1 is less than the nber Previously Pai nber Previously Pai	d For IN THIS	S SPACE is	less than	20', enter "20."	AC	TOTAL DIT. FEE		OR,	TOTAL DOIT, FEE	·	
• 1	he 'Highest Num	ber Previously Paid	For (Total or	independer	ress the 11) is the	no. enter o. highest number	r touni	in the ap	propriate box	in colu	mn 1.	ŀ	